DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 01/27/2011
FORM APPROVED
OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	155187	A. BUILDING _____ B. WING _____	C 01/21/2011

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
GOLDEN LIVING CENTER-FOUNTAINVIEW PLACE	3175 LANCER STREET PORTAGE, IN 46368

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETION DATE
F 000	INITIAL COMMENTS	F 000		

This visit was for the Investigation of Complaint IN00085034.

Complaint IN00085034 - Substantiated. Federal/State deficiencies related to the allegations are cited at F-315.

Survey dates: January 20 and 21, 2011

Facility Number: 000098
Provider Number: 155187
AIM Number: 100290980

Survey Team:
Toni Krakowski, RN TC
Vicki Manuwal, RN

Census Bed Type:
SNF/NF: 175
Total: 175

Census Payor Type:
Medicare: 33
Medicaid: 128
Other: 14
Total: 175

Sample: 3

These deficiencies also reflect state findings in accordance with 410 IAC 16.2.

Quality review 1/26/11 by Suzanne Williams, RN

F 315 SS=D	483.25(d) NO CATHETER, PREVENT UTI, RESTORE BLADDER	F 315	F315	

Based on the resident's comprehensive assessment, the facility must ensure that a

1. Resident was immediately sent out to the emergency room and a new catheter was inserted. Resident no longer resides at this facility.

2. All residents with indwelling catheters have the potential to be affected by the alleged deficient practice. Residents with indwelling catheters were assessed for placement and verification of orders. A total of seven residents were identified with indwelling catheters and none of them were affected by the alleged deficient practice.

3. Re-educated licensed staff on placement of key for central supply. A designated licensed staff member will sign every shift to verify that the key is available and present. Re-educated licensed staff to call DNS or designee if key is unavailable. Each resident with an indwelling catheter will have an additional indwelling catheter and supplies maintained on the unit. Additional indwelling catheter supplies will be maintained in central supply. All new admissions will have their orders reviewed and any resident with an indwelling catheter will have supplies set up on their unit.

4. An audit will be completed 5x per week x 2 weeks and then 3x week x 2 weeks to ensure indwelling catheters are present on the units and the key for central supply is available. After initial four weeks of auditing, units will be audited monthly x 3 months and then random audits quarterly to ensure indwelling catheters and supplies are available. Results will be reported by the DNS or designee to QAA.

5. The date of completion for F315 is January 31, 2011.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
	Executive Director	January 31, 2011

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F 315	Continued From page 1	F 315		

resident who enters the facility without an indwelling catheter is not catheterized unless the resident's clinical condition demonstrates that catheterization was necessary; and a resident who is incontinent of bladder receives appropriate treatment and services to prevent urinary tract infections and to restore as much normal bladder function as possible.

This REQUIREMENT is not met as evidenced by:
Based on observation, interview, and record review, the facility failed to provide the necessary Foley catheter to replace the one that became dislodged from a resident with a bladder tumor, urinary retention, and history of urosepsis. This deficient practice affected 1 of 2 residents reviewed with a Foley catheter in a sample of 3.

Resident: # C

Findings include:

During initial tour of the facility on 1/20/11 at 10:10 a.m., Resident # C's daughter was visibly upset about the lack of care her mother received after her Foley catheter became dislodged the previous evening. Resident # C's daughter indicated her mother was in the facility for intravenous antibiotic therapy for urosepsis and was scheduled for bladder surgery on 1/24/11. "I had mother to the urologist yesterday and Dr. (Name) told us that the catheter was necessary because the tumor was blocking the flow of urine." She further indicated she was not notified that the catheter had come out and only found out this morning when Resident # C told her. "My mother's blood pressure is 206/107 this morning

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and it is never high. She's acting a little confused. This is the same thing that happened when she ended up with urosepsis. Staff told me the nurse didn't have a key to get a new catheter. I only found out because I came for a meeting with therapy this morning and stopped in to visit mother first. They are supposed to notify me of these things." Resident # C's daughter indicated she called the physician herself and he wanted the resident sent to the emergency room. "We're waiting for the ambulance to arrive, now." Resident # C was observed lying in bed and shaking at the time of the interview. She denied feeling chilled or having an elevated temperature. "The nurse said my temperature was normal, I don't know why I can't stop shaking." Resident # C's vital signs, taken just minutes earlier, were: "T (temperature) 96.3, BP (blood pressure) 206/107, R (respirations) 22, and P (pulse) 95."

LPN # 2 indicated during an interview at 10:20 a.m. on 1/20/11, the evening nurse could not find the key for Central Supply. "I told the nurse the Foley (catheter) was to stay in for four days until surgery. Somehow it must have gotten lost in translation." She further indicated she didn't know how long Resident # C was without the Foley catheter because nothing was told on morning report or documented in the Nurse's Notes.

Resident # C's clinical record was reviewed on 1/20/11 at 11:10 a.m. and indicated diagnoses of, but not limited to: urinary retention, bladder tumor, and history of urosepsis.

A Physician's Order, written by the urologist and dated 1/19/11 at 2:30 p.m., indicated, "...2. Cipro 500 mg. (milligram) bid (twice daily) x 10 d. (days)

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3. Foley (catheter) to gravity-keep anchored to thigh at all times...."

Nurse's Note, dated 1/19/11 at 4:45 p.m., indicated, "Resident returned from urology appt (appointment) accompanied by daughter, new order recd (received) and noted. Vitals: BP 130/70, P 76, R 18, T 97.0."

Review of the TAR (Treatment Administration Record), dated 1/1/11 through 1/31/11, indicated, "If resident does not void q (every) 8 hours straight cath and call Dr. (Name)...." That order was dated 1/5/11 and was replaced with the order (1/19/11) to maintain the Foley catheter. The TAR further indicated Resident # C had been straight cathed at 12:00 a.m. on 1/19/11. Nurse's Notes lacked documentation regarding the dislodged Foley catheter, the need to replace it, and assessment of the resident.

The "Resident Continence by Shift Report," dated 1/19/11, indicated Resident # C was incontinent of bladder (one time) and continent of bladder (one time) from 11:00 p.m. (1/19/11) to 7:00 a.m. (1/20/11).

Resident # C's Plan of Care, dated 1/4/11, indicated, "Focus: Resident is at risk for complications r/t (related to) use of 16 Fr (French)/30 cc Foley catheter...Interventions: Catheter care per staff per orders...."

A handwritten note was left in the Nurse's station by the evening nurse on 1/19/11 and indicated, "(Resident # C) Insert a 16 F 30 cc balloon Foley in a.m. 1/20 when able to get into Central Supply. No one on p.m.'s has key to Central. The Master Keys are gone."

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The Director of Clinical Education indicated in an interview on 1/20/11 at 10:55 a.m., "The nurse should have called her supervisor if she couldn't find a key for Central Supply. The key is available to nursing staff, but somehow it got misplaced and staff couldn't find it yesterday."

During an interview with Resident # C's daughter on 1/21/11 at 10:30 a.m., she indicated her mother had "almost 600 cc's (cubic centimeters) of urine in her bladder" when she got to the hospital on 1/20/11. She further indicated a physician at the hospital re-inserted a Foley catheter and her mother returned to the facility.

On 1/20/11 at 2:10 p.m., the Director of Nursing indicated a full investigation was underway to determine why staff did not have access to Central Supply. "We have staff who live just five minutes from here and they would have come in to provide a key to Central Supply."

This federal tag relates to Complaint IN00085034.

3.1-41(a)(2)